U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U -	2. Fiscal Year Covered From:	
/	1 / 1 / 2004 Through: 12 / 31 / 2004	
3. Name and address of person filing.	Name, file number, and address of labor organization.	
Name Mark A Rippeto	Name IAMAW District No. 9	
	Labor Organization File Number 0.38-242	
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any	
Street 12365 St. Charles Rock Road	Street 12365 St. Charles Rock Road	
City Bridgeton	City Bridgeton	
State MO ZIP Code + 4 63044	State MO ZIP Code + 4 63044	
5. Position in labor organization. Asst. Directing Business Representative Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):		
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizati	derived income or other economic benefit of on represents or is actively seeking to represent.	
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.	
Name Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street	7.b. Amount.	
City		
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State ZIP Code + 4	Anne is the little destroyed — for the little in Print was to the extremental and an extremental print of the destroyed registery (), i.e. as if	
According to the property of t	rature	

8/9/05 Date 314-739-6200

Telephone Number

Name of Person Filing Mark A. Rippeto	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Diekemper, Hammond, Shinners & La	green,	
Trade Name, if any:	X a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust c. Employer	
Street 7730 Carondelet Avenue - Ste. 200	C. Employer	
City Clayton		
State MO ZIP Code + 4 6.3105		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Law firm representing IAMAW District	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street	11.b. Approximate dollar value of such dealing. 41,362.00	
City	12.a. Nature of interest held or income received.	
State ZIP Code + 4	Modest lunch and legal representation	
	12.b. Amount. 30.00	
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4		
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	

Name of Person Filing Mark A. Rippeto	File Number U-	
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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Fiduciary Consultants, Inc.	a. Labor Organization	
Trade Name, if any:	X b. Trust	
P.O. Box, Bldg., Room No., if any	c. Employer	
Street 12444 Powerscourt Drive, Ste. 190 City St. Louis		
er vertiret i samen Mes ene diller samet eles estillet es estillet vertiret vertiret este este este este este e		
State MO ZIP Code + 4 63131		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name District 9 Pension & Welfare Trus Trade Name, if any:	ts Provides consulting services for both Trust Funds	
P.O. Box, Bldg., Room No., if any		
Street 12365 St. Charles Rock Road		
City Bridgeton	11.b. Approximate dollar value of such dealing. 60,900.00	
State MO ZIP Code + 4 63044	Lunch/Dinner and golf outing	
to a second second process and a second seco		
	12.b. Amount. 150.00	
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name ;		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		
City		
State ZIP Code + 4		
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
8. Name and address of Business (including trade name, if any). Name J.M. Hartwell, L.P. Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 515 Madison Avenue — 31st Floor City New York State NY ZIP Code +4 10022	9. Business deals with: a. Labor Organization X b. Trust c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name District 9 Pension Trust Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 12365 St. Charles Rock Road	Investment Manager	
Experimental control of the control	11.b. Approximate dollar value of such dealing. 124,777.00	
City Datace	Leanne an earl agus ann an	
City Bridgeton State MO ZIP Code + 4 63044	12.a. Nature of interest held or income received. Dinner	
· The transfer of the second o	A second second section of the control of the contr	
· The transfer of the second o	Dinner 12.b. Amount. 12.b. Amount. 12.b. Amount.	
State MO ZIP Code + 4 6 3 0 4 4 C. Received from any employer (other than an employer covered under	Dinner 12.b. Amount. 12.b. Amount. 10.0.00	
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any	Dinner 12.b. Amount. 12.b. Amount. 10.0.00 er parts A and B above) or other thing of value.	

Name of Person Filing Mark A. Rippeto	File Number U-	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
8. Name and address of Business (including trade name, if any). Name Invesco National Asset Management Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 400 West Mark Street, Ste. 2500 City Louisville State KY ZIP Code+4 10112	9. Business deals with: a. Labor Organization X b. Trust c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name District 9 Pension/Welfare Trusts Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 12365 St. Charles Rock Road	Investment Manager	
Street 12365 St. Charles Rock Road	11.b. Approximate dollar value of such dealing. 198,300.00	
City Bridgeton State MO ZIP Code + 4 63044	12.a. Nature of interest held or income received. Dinner	
	12.b. Amount. 95.00	
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.		
13.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.	
(including trade name, if any). Name Trade Name, if any:		
P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4		
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	

Name of Person Filing Mark A. Rippeto	File	e Number U-
B. Held an interest in or derived income or economic benefit with monetary vasubstantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is act (2) any part of which consists of buying from or selling or leasing directly or in dealing with your labor organization or with a trust in which your labor organization.	wise dealing with the business ively seeking to represent, or	
8. Name and address of Business (including trade name, if any). Name Chicago Equity Partners	9. Business deals with:	
Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 180 North LaSalle Street, Ste. 3: City Chicago State IL ZIP Code +4 60601	X b. Trust	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name District 9 Pension Trust Fund Trade Name, if any: P.O. Box, Bldg., Room No., if any	Investment Mar	nager
Street 12365 St. Charles Rock Road	11.b. Approximate dollar value of	such dealing. 126,000.00
City Bridgeton State MO ZIP Code + 4 63044	12.a. Nature of interest held or the state of the state o	ncome received.
	12.b. Amount.	2.6000
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money	r parts A and B above) or other thing of value.	
Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any Street City		
State ZIP Code + 4	and the other section of the contract of the c	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	

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Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Stoneridge Investment Partners		
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 7 Great Valley Parkway - Ste. 290	c. Employer	
City Malvern		
State PA ZIP Code + 4 19355		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name District 9 Pension Trust Fund	Investment Manager	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street 12365 St. Charles Rock Road		
	11.b. Approximate dollar value of such dealing. 144,000.00	
City Bridgeton	12.a. Nature of interest held or income received.	
State MO ZIP Code + 4 63044	Dinner & golf outing	
	12.b. Amount. 185.00	
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	r parts A and B above) or other thing of value.	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
g in the market courts were already control of the		
Name:		
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Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
P.O. Box, Bldg., Room No., if any Street		
Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City		
P.O. Box, Bldg., Room No., if any Street		

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8. Name and address of Business (including trade name, if any). Name Lazard Freres Asset Management Trade Name, if any: P.O. Box, Bldg., Room No., if any	9. Business deals with: a. Labor Organization X b. Trust	
Street 30 Rockefeller Plaza City New York State NY ZIP Code +4 10112	c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name District 9 Pension Trust Fund Trade Name, if any: P.O. Box, Bldg., Room No., if any	Investment Manager	
Street 12365 St. Charles Rock Road	11.b. Approximate dollar value of such dealing.	510,000.00
City Bridgeton State MO ZIP Code + 4 63044	12.a. Nature of interest held or income recei	ived.
Zir Code + 4 3 0 3 0 4 1	Dinner and golf ou	ıting
Zir Code + 4 3 C S C T T	Dinner and golf ou	160.00
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	12.b. Amount.	160.00
C. Received from any employer (other than an employer covered unde	12.b. Amount.	160.00
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant	12.b. Amount. r parts A and B above) or other thing of value.	160.00
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	12.b. Amount. r parts A and B above) or other thing of value.	160.00
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any). Name	12.b. Amount. r parts A and B above) or other thing of value.	160.00

Name of Person Filing Mark A. Rippeto	File Number U-	
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8. Name and address of Business (including trade name, if any). Name Fox Asset Management Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 775 California Avenue City Reno State NV ZIP Code +4 89509	9. Business deals with: a. Labor Organization X b. Trust c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name District 9 Pension Trust Fund Trade Name, if any: P.O. Box, Bldg., Room No., if any	Investment Manager	
Street 12365 St. Charles Rock Road	11.b. Approximate dollar value of such dealing. 163,000.00	
City Bridgeton	12.a. Nature of interest held or income received.	
State MO ZIP Code + 4 63044	Dinner and golf outing	
	12.b. Amount. 155.00	
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name Trade Name, if any:		
P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4		
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.	